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## BIB DATA SHEET

CONFIRMATION NO. 6866

<b>SERIAL NUMBER</b> 10/538,006	<b>FILING or 371(c) DATE</b> 10/27/2005 <b>RULE</b>	<b>CLASS</b> 324	<b>GROUP ART UNIT</b> 3711	<b>ATTORNEY DOCKET NO.</b> 4145-000007/US		
<b>APPLICANTS</b> Fredrik Ohlsson, Torslanda, SWEDEN; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/SE03/01891 12/03/2003 <b>** FOREIGN APPLICATIONS *****</b> SWEDEN 0203568-1 12/03/2002 UNITED STATES OF AMERICA 60430345 12/03/2002 <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b>						
Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No 35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Verified and Acknowledged <u>/KURT FERNSTROM/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> SWEDEN	<b>SHEETS DRAWINGS</b> 10	<b>TOTAL CLAIMS</b> 34	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> HARNESS, DICKEY & PIERCE, P.L.C. P.O. BOX 8910 RESTON, VA 20195 UNITED STATES						
<b>TITLE</b> Interventional simulation device						
<b>FILING FEE RECEIVED</b> 865	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			